

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



January 7, 1980

ALL-COUNTY LETTER NO. 80-1

• TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: SPECIAL INSTRUCTIONS FOR JANUARY 15, 1980 TIME STUDY (SOC 241)

REFERENCE: ALL-COUNTY INFORMATION NOTICE 1-136-79

Information regarding client-related travel time is urgently needed to assess the impact of the Department of Social Services' proposed social service regulations. For just the time study (Form SOC 241) scheduled January 15, 1980, counties are directed to report an additional item. In addition to reporting "Transaction Time" in the usual manner, counties are to also report (in hours and minutes) client related travel.

To report this additional item, enter the amount of client related travel in the space between the "Reporting or Fund Category" box and the "Hours" box on Form SOC 241. For example, on the attached sample form, in example Number 1, 3 hours and 35 minutes were reported for Transaction Time. Of that 3 hours and 35 minutes, 2 hours and 15 minutes were spent in client related travel. In example Number 2, 45 minutes was the total Transaction Time of which no time was spent in client related travel.

If you have any questions regarding these special reporting procedures, please call David Webber at (916) 322-4662.

Sincerely,

A handwritten signature in cursive script, appearing to read "Claude E. Finn".

CLAUDE E. FINN
Deputy Director
Administration Division

Attachment

cc: CWDA

SOCIAL SERVICES WORKER TIME SHEET

Page ____ of ____

Sample Date

Month	Day	Year
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Service Provided	Reporting or Funding Category	Transaction Time
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County Code

County Name

Employee Name

EXAMPLE # ONE

Hrs. Minutes

1. 0 4 1 2:15 3 3 5

EXAMPLE # TWO

2. 6 9 6 0:00 0 4 5

Complete a line entry today for each Title XX or Title IV transaction. Enter service provided; reporting or funding category; and time, in hours and minutes.

Title XX ServicesTitle IV-C AFDC WIN 90/10Mandated ServicesServices and Appraisals

- 01 Information and Referral
(Reporting Code "0" ONLY)
- 02 Protective Services for Children
- 03 Protective Services for Adults
- 04 Out-of-Home Care Services
for Children
- 05 Out-of-Home Care Services
for Adults
- 06 Child Day Care Services
- 07 Health-Related Services
- 08 Family Planning
- 09 In-Home Supportive Services
- 10 Employment-Related Services

- 25 Child Day Care Services
- 26 Family Planning Services
- 27 Counseling Services
- 28 Employment-Related Medical and
Remedial Care and Health-
Related Services
- 29 Selected Vocational Rehabilitation
Services
- 30 Appraisals

Title IV-B CWS Services

- 31 Evening/Night/Weekend Duty of
CPS Workers
- 32 Temporary in-Home Caretakers
- 33 Respite Day Care
- 34 Homemaker and Parenting Services
- 35 Specialized Needs
- 36 Return of Out-of-State Runaways
- 37 Other Child Welfare Services

Optional Services

- 11 Special Care for Children
in Their Own Homes
- 12 Home Management and Other
Functional Educational Services
- 13 Employment/Education/Training
- 14 Services to Children
with Special Problems
- 15 Services to Alleviate or
Prevent Family Problems
- 16 Sustenance
- 17 Housing Referral Services
- 18 Legal Referral Services
- 19 Diagnostic Treatment
Services for Children
- 20 Special Services for the Blind
- 21 Special Services for Adults
- 22 Services for Disabled Individuals
- 23 Services to County Jail Inmates
- 24 Family Protection and
Reunification

Reporting Categories

- 1 AFDC
- 2 Income Eligible
- 3 Income Eligible (Medi-Cal)
- 4 Without Regard to Income
(Protection Goal Only)
- 5 SSI/SSP — Aged
- 6 SSI/SSP — Blind
- 7 SSI/SSP — Disabled

Funding Categories

- 8 Title IV — C WIN
- 9 Title IV — B CWS

Information and Referral

- 0 Always use "0" for the reporting
category when reporting this
Service

INSTRUCTIONS

- I. **Participants:** This time sheet is to be completed by each person who completes the Social Services Worker Time study, DFA 46, with the exception of: (1) homemaker/chore workers employed by the County Welfare Department; (2) staff who are employed in day care centers and other separate approved facilities; and (3) licensing workers. Report only Title XX IV-B and IV-C funded services.
- II. **Purpose:** The purpose of the Social Services Worker Time Sheet is to collect information on the amount of time spent providing each type of Title XX or Title IV-funded social service to or on behalf of each primary social service recipient. This is needed to develop required cost information called for on the federal Title XX and Title IV social service reports.
- III. **Completing the form:** For each period of social service activity during the survey day enter:
 - (1) The code for the type of social service provided in the **Service Provided** column.
 - (2) The code for the reporting (or funding) category of the Primary Recipient in the **Reporting or Funding Category** column.
 - (3) The length of time, in hours and minutes, spent providing the social service. Record this in the **Transaction Time** column.

Transaction Time is the time a social services worker or first line supervisor spends with or on behalf of a recipient (either primary or non-primary) providing a specific social service. It includes interviews, consultation, phone calls, written correspondence, client related travel time, recording, reporting and delivery activities.

When more than one service is involved in a single recipient contact, the total time should be divided between the services provided and a separate entry for each service should be made. Travel time should also be divided between recipients when more than one is visited on a single trip.

Example: Your first social service activity of the day involves arranging for chore service for an SSI-SSP Aged person. It has taken you 20 minutes to complete the arrangements.

On line number 1, under **Service Provided**, you would enter service code 09 for "In-Home Supportive Services". Under **Reporting Category** you would enter reporting code 5 for "SSI Aged". Under **Transaction Time** you would enter 0 in the hours column and 20 in the minutes column to indicate the amount of time you spent on this activity. (You may round to the nearest five minute interval, if you wish.)

Thus, the entry for this transaction would be as follows:

(Enter numeric characters only for each line item, sample date and county code. All entries for these items must be numeric or blank. No alphabetic characters should be included.)

	SERVICE PROVIDED	REPORTING OR FUNDING CATEGORY	TRANSACTION TIME
1.	09	5	0 : 20
2.			:

Continue to record in a similar way each period of time spent providing the social services listed on this form. If you should need more lines than are provided, attach another form and mark it Page 2.

- IV. **Information and Referral Services:** When an Information and Referral Service is provided to a **Primary Recipient** (or a person receiving services on behalf of a primary recipient), and the referral is for service delivery of a Title XX service contained in the county social service plan, report the service to which referred and the reporting category of the primary recipient. If the referral is for a service not contained in the county plan, the referral is considered I&R. Report this in the same manner had the service been provided to an individual who was not a Primary or Social Service Recipient (using "01" for service provided and "0" for the reporting category).
- V. **GENERAL INSTRUCTIONS:** It is important that you record the entries for each service activity immediately after completing the transaction. Otherwise, you may be unable to accurately recall the necessary information.

Report only the time actually spent providing Title XX or Title IV-funded social services. The total of all separate transaction time entries on this form need not add up to any specific total number of hours. A portion of each day includes a certain amount of unallocated time which should not be accounted for or prorated into this time sheet.

As soon as all of the reports have been completed by each person, please batch the forms and send to:

Data Management and Analysis Bureau
State Department of Social Services
744 P Street
Sacramento, CA 95814